

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY
OR
REVOCA^TION OF POWER OF ATTORNEY
WITH A NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS

Patent No.	6,955,278
Issue Date	October 18, 2005
First Named Inventor	Willy Lorschmidt
Title	Dispenser for Paste-Like Products
Art Unit	N/A
Examiner Name	N/A
Attorney Docket Number	INOT-1-1001

Attorney revokes all previous powers of attorney given in the above-identified application.

<input type="checkbox"/> A Power of Attorney is submitted herewith.	25315
OR	
<input checked="" type="checkbox"/> I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:	
OR	
<input type="checkbox"/> I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above and to transact all business in the United States Patent and Trademark Office connected therewith:	

Please re-organize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number.
OR
 The address associated with Customer Number: 25315
OR

<input type="checkbox"/>	Firm or Individual Name	
Address		
City	State	Zip
Country		
Telephone	Email	

I am the

Applicant/Inventor.
OR _____ claims a right to joint ownership interest. See 37 CFR 3.71.

<input checked="" type="checkbox"/> <i>Assignment of rights</i> <input type="checkbox"/> <i>Statement under 37 CFR 3.73(a) (from PTO/SB/06)</i> submitted herewith or filed on _____	
SIGNATURE of Applicant or Assignee of Record	
Signature	<i>Gleixner, Inc.</i>
Name	<i>Gleixner, Inc.</i>
Title and Company	<i>Hotels</i>
Date <i>13.07.09</i>	
Telephone <i>0943310400-2</i>	
NOTE: Signatures of all the inventors or assignees, and of their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	
12507 NABBURG Tel. 09421 121072 Fax 09421 1210740	
<input checked="" type="checkbox"/> <i>*Total of 2 forms are submitted.</i>	

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit under a program or activity authorized by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete. The time required to complete this collection is based on the average time spent by individuals performing the following: gathering, preparing, and submitting the completed application form to the USPTO. This will vary depending upon the individual user. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO:** **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.